

What I have to say today is personal reflection, and not an academic presentation. All photos, like the reflection on a dam in the Whipstick Forest in this slide, unless attributed otherwise, were taken by me, and the series of six artworks which I use as my main illustrations were made by Bendigo artist Iain Stewart.

# Overview

- Birth stories and privilege
- Our surrogacy story
- Protecting my wellbeing
- Surrogacy and feminism
  - a personal perspective
- Overall impact on me



Artist: Iain Stewart  
Work: In a sea of humanity



I love my family's birth stories, such as the one about how my mother was born precipitously when her mother put her finger in the light socket. My mother won a five pound bet that I would be conceived in the first month of trying, and later, how my birth was so fast my father "had not even left the hospital" when I was born. Not everyone knows their birth story, and I did not realise for a long time what privilege comes from knowing your birth story.

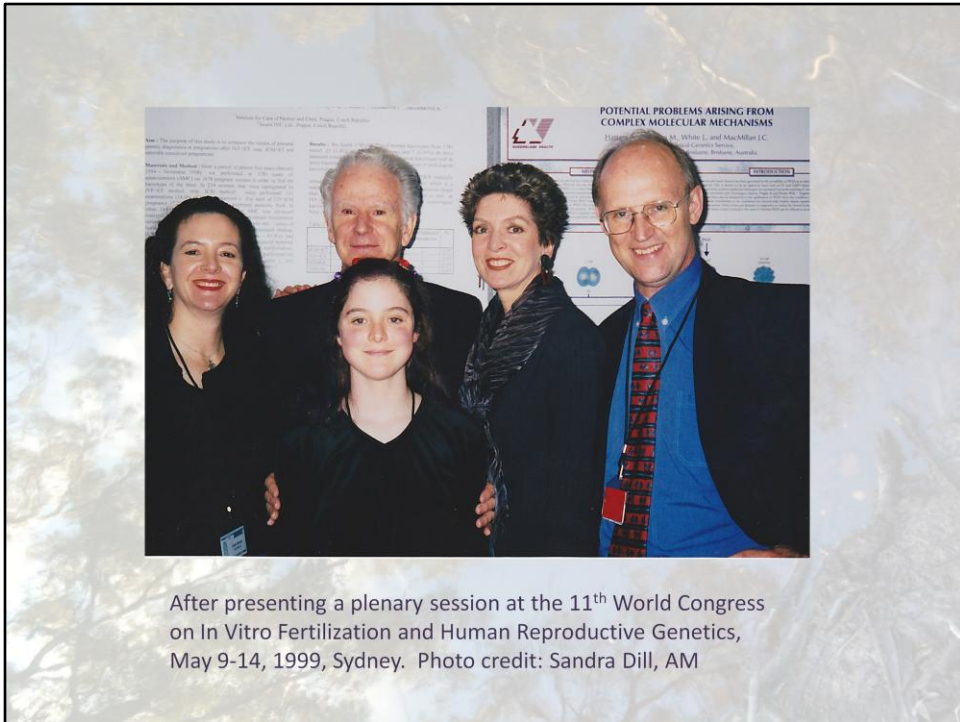
Privilege is something we tend to notice in its absence. The classic example is of white, heterosexual men being unaware of their privilege in the same way a fish is unaware of water. You are surrounded by it but take it for granted as normal. If you have not experienced racism, queer hate, or sexism directly then you are less likely to notice it happening or be aware of its impact. Only recently I realised what privilege I enjoyed as being a planned baby. I grew up with the confident knowledge that I was wanted. My family circumstances were reasonably conventional. How a family is formed is not important. What is important is that all people involved are treated with integrity and respect, everyone has the best possible chance of wellbeing, and that children are loved. I gave birth to my niece nearly 25 years ago and in doing so helped extend our family with another, much wanted, member. This is how it happened.



My brother-in-law Sev Clarke is an original, creative thinker. Despite them not having a sperm or uterus between them, it was his idea that that they use donor sperm and Maggie’s egg and the fledgling science of reproductive technology with a gestational mother to have a child together. Maggie immediately thought of me, a person with a sense of adventure who was fully immersed in childbirth politics and birth advocacy, as someone who might be interested.

Meanwhile I’d read an article about traditional Pacific Islander surrogacy practices, which said sisters have been having babies for sisters for centuries, (did you know Eddie Mabo was brought up in a surrogacy arrangement?) and considered if I could do that for Maggie. There was a space for a child in our family; I had two children, our sister Cynthia had three, and it would fit for Maggie to have one too. My children were asking for another sibling, which I had no intention of providing, but a cousin was an alternative.

We had dinner together, and Maggie and I both opened our mouths to speak at once. You have to be quick to get a word in edgeways in our family, and I spoke first, with no preamble – remember, we had never discussed this – “I’m sorry, but I couldn’t have a baby for you”. I had not been thinking of IVF, but supplying the egg myself. I did not think I could give away a baby that looked at me with my brown eyes. When Maggie picked her jaw up off the table she said, “We were just going to ask you”. I asked for more details, and the IVF component resolved that issue. Everyone is different; Cynthia offered to donate an egg, but would not have undertaken a pregnancy. I liked giving birth, and was interested to do it again. Don’t like being pregnant much, but, oh, well. It fitted with where I was at in my life.



After presenting a plenary session at the 11<sup>th</sup> World Congress on In Vitro Fertilization and Human Reproductive Genetics, May 9-14, 1999, Sydney. Photo credit: Sandra Dill, AM

Our IVF specialist was Professor John Leeton. He was rather taken aback when Maggie and Sev visited him with their plan. Some opposition to reproductive technology, especially in the early days, was that it was male scientists using poor women for their *dastardly* experiments. In this circumstance, it was us with a great idea, persuading the scientist to use his skills to make it happen.

It wasn't only the medical field that had to be negotiated, but also the legal and ethical ones. An opinion was sought from the then Victorian Solicitor-General as to the legality of our actions in respect of the current law, and his interpretation was that it was legal. Finding a hospital prepared to do the procedure was another hurdle we overcame.



Artist: Iain Stewart  
Work: Incubate

Artist: Iain Stewart  
Work: D - Day

Like my mother, I was very fertile. Alice was conceived in the first IVF cycle. I lived my normal life, working part time, looking after my kids, going to yoga, eating well, abstaining from alcohol (I asked Maggie to do likewise, which she did, although she drew the line at going to yoga). When I was about 16 weeks pregnant Maggie spoke of nursery decor, knitting and baby clothes. Such things had not occurred to me. I remember discussing with this with my friend Marjie. Marjie's response was that, knowing me, she would not expect me to be emotional about the baby or preparing for its upbringing. I was pleased she saw it the same way I did.

Before embryo transfer I suggested Maggie and Sev look down the microscope to see what few parents see, and I felt Maggie bond with the baby then. I did by best physically by the child as I gestated her, but emotionally, and in planning for her future, I knew she had someone who was dedicated to her. Maggie started to prepare to induce lactation, so she could feed Alice and supplement any donated expressed breast milk I, or friends, produced.

Protecting my wellbeing was clearly of high importance to Maggie. There was never any coercion or pressure. Part of how she did that was to be really careful that I always acted with a free choice, and had the opportunity to back out where appropriate. Before embryo transfer it was thoroughly checked if I was happy to go ahead. In the car as we drove to Melbourne for a pregnancy test to confirm that I was, indeed pregnant, I made a comment starting, "if it doesn't work, then next time..." but did not get a chance to finish, as Maggie expressed great relief that I would, indeed be prepared for a second attempt. She had not asked me because she did not want to put pressure on me. Likewise I knew I could have kept the child and not relinquished her to Maggie and Sev, within a limited time, of course.

It is not just me – feeling as though you have agency and choice over your life is very important for mental health. I am in favour of surrogacy but have concern about how it is practiced in commercial arrangements where the gestational mother does not have a choice about how she lives and if she is able to give up the child, or in a situation where a woman is being coerced. The answer is not to ban it, but to ensure good human rights practices.

Note: Alice was born 23 May 1988, and the date on this picture is when the photo was published.



Artist: Iain Stewart  
Work: A in W

Alice was born early, by caesarean section because I had placenta previa and was starting to haemorrhage too often. I started expressing milk immediately, and the sister of a friend arrived with expressed breast milk to ensure Alice was not put at risk of being fed artificial baby milks. A community supported the creation and nurture of Alice, and meeting Joanne for the first time as she handed over a bag of EBM was an example of that.

I expressed for four months, and other women donated milk also, including one who did so for nine months. Alice was fortunate to not have artificial baby milk until after I stopped expressing, and Maggie successfully induced lactation and fed her at the breast using a supply line device, with donated milk plus artificial babymilk.

## Not letting the facts get in the way of an opinion: surrogacy and radical feminism

“ ... power differences between the two women were extraordinarily stark: Maggie was the glamorous and well spoken woman of the world; Linda who carried the baby, was the demure school teacher in child-like frocks and pig tails.” (Klein, 2011, p. 23)

I said I'd give a personal perspective on surrogacy and feminism. While the response to Alice's birth was overwhelmingly positive, the quote on the slide illustrates opposition from women who assumed I was oppressed and exploited, a victim of medical technology and an overbearing older sister. This can and does happen to some women, but assuming victimhood was disrespectful and untrue. It is poor scholarship that the author of this article allowed emotive, one-eyed obsession to stop her from a balanced perspective.

Anthropologist Elly Teman's research found that while women who chose to enter surrogacy arrangements were perfectly well balanced psychologically, the representation and assumption about them was that they were somehow unbalanced. Teman suggests that the public unease with the idea of surrogacy is a result of cultural anxiety; surrogacy is a subversive activity that challenges the social construction of family and motherhood. If a woman is willing to gestate a child in order to give it away shouldn't that make her somehow unnatural, or not normal? That someone might be prepared to do this threatens the construction of motherhood as universally nurturing where babies are wanted, loved and cherished. Psychosocial research into surrogate mothers is framed in a way that presupposes these women are psychologically aberrant. However she says that 'none of the studies have successfully located any "abnormal" personality traits among surrogates.

Considering the diverse families that are now considering surrogacy that cultural anxiety is either up a notch – or has diminished. We live in a society, not an economy. What is most important is how we treat one another.



Easter 2011  
Yvonne Kirkman with her  
children, (and some partners)  
grandchildren, and great-  
grandchildren



Women have a human right to body autonomy, which includes reproductive freedom. Within that, I believe it is important for a woman's mental health and wellbeing to be able to make a free choice to relinquish a baby she has given birth to. How she feels about that she won't know until she has given birth. In a surrogacy situation, if she made a free choice and was OK with her decision to gestate a baby for someone else, chances are she will relinquish without qualms. If she has been coerced or felt as though she did not have a choice, from financial desperation or legal repression, that is not good practice.

I have had a very positive experience, and no regrets about gestating my niece. I think she is happy to be alive too. Twenty-five years later, aside from the obvious benefit of society having this fine human being, the personal benefits to me include a sense of control over my life, through the satisfaction of being innovative, and making history by using the system to work for us in unconventional and beneficial ways.



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